

**FOOD FACILITY INSPECTION REPORT**  
**GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT**

225 N. Tehama Street, Willows, CA 95988  
 Phone (530) 934-6102 FAX (530) 934-6103

Name of Facility/ DBA: <u>BURGER KING</u>		Inspection Date: <u>3/22/23</u>
Address: <u>901 NEWVILLE RD., ORLAND, CA 95963</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>
Owner/Permittee: <u>NORCAL FAST FOOD</u>	Phone No.:	Inspection Time: <u>3:30</u>
Certified Food Handler: <u>DELFINA GONZALEZ</u>		Permit Exp. Date:
Service: <input checked="" type="checkbox"/> Routine Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input type="checkbox"/> Construction/Pre-opening <input type="checkbox"/> Other:		Certificate Expiration Date: <u>01/19/24</u> <small>(Certificate expires five years after it is issued)</small>
Applicable Law <u>CALIFORNIA RETAIL FOOD CODE</u> ("CalCode"), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)		

In = In compliance		N/A = Not Applicable		N/O = Not Observed		Maj = Major violation		Out = Items not in compliance		COS = Corrected On Site	
Critical Risk Factors for Disease						Maj	Out	COS		Out	COS
In									24. Person in charge present and performs duties		
<u>In</u>							X		25. Personal cleanliness and hair restraints		
<u>In</u>	N/O								26. Approved thawing methods used		
<u>In</u>	N/O						X		27. Food separated and protected		
<u>In</u>	N/O								28. Washing fruits and vegetables		
<u>In</u>									29. Toxic substances properly identified, stored and used		
<u>In</u>	N/A	N/O							30. Food storage, 31. Self service, 32. Labeled		
<u>In</u>	N/A								33. Nonfood contact surfaces clean		
<u>In</u>	N/A	N/O							34. Warewashing facilities maintained, test strips		
<u>In</u>	N/A	N/O							35. Equipment, utensils, approved, clean good repair		
<u>In</u>	N/A	<u>N/O</u>							36. Equipment, utensils and linens, storage and use		
<u>In</u>	N/A	<u>N/O</u>							37. Vending Machines		
<u>In</u>									38. Adequate ventilation and lighting		X
<u>In</u>	N/A	N/O							39. Thermometers provided and accurate		
<u>In</u>									40. Wiping cloths properly used and stored		
<u>In</u>	<u>N/A</u>	N/O							41. Plumbing, proper backflow prevention		
<u>In</u>	<u>N/A</u>	N/O							42. Garbage properly disposed; facilities maintained		
<u>In</u>	<u>N/A</u>	N/O							43. Toilet facilities supplied, properly constructed, clean		
<u>In</u>	<u>N/A</u>								44. Premises clean, vermin proof; personal items separate		X
<u>In</u>									45. Floors, walls and ceilings maintained and clean		X
<u>In</u>									46. No unapproved living or sleeping quarters		
<u>In</u>									47. Signs posted; Permit & inspection report available		
<u>In</u>									48. Plan Review Required		

No PHF [ ]					
°F	Food	Location	°F	Food	Location
32	BALON	WALK IN FRIDGE			
163	BURGER	HOT HOLDING BASKET			
141	CHICKEN	HOT HOLDING BASKET			

Comments: VIOLATIONS:

① ALL FOOD SERVICE EMPLOYEES SHALL HAVE EVIDENCE OF HAVING A CERTIFIED FOOD HANDLER CARD AVAILABLE AT THE TIME OF INSPECTION. 1 OPERATOR LACKED COPIES OF CARDS FOR EMPLOYEES.

④ ALL EMPLOYEE BEVERAGES IN FOOD PREP AREAS SHALL HAVE A COVER/LID ETC. TO HELP PROTECT FROM CROSS →

Received By: Delphin Gonzalez REHS: Andrew Perry

OFFICIAL INSPECTION REPORT

Continuation Sheet

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Comments: VIOLATIONS (CONT.)

④ CONTAMINATION. NOBSERVED EMPLOYEE DRINKING FROM CUP WITHOUT LID.

③⑧ REPAIR THE LIGHTING IN THE WALK-IN FREEZER SO THAT IT PROVIDES ADEQUATE LIGHTING.

④④ REMOVE ALL UN-USED OR BROKEN EQUIPMENT INSIDE THE RESTAURANT WHEN NO LONGER BEING USED. ~ SMALL UNDER COUNTER FRIDGE NEAR COFFEE.

④⑤ CLEAN/SANITIZE ALL FLOORING, ESPECIALLY BEHIND, UNDER & AROUND TABLES/APPLIANCES. NOBSERVED QUITE A BIT OF GREASE & FOOD DEBRIS IN THESE AREAS.

④⑤ REPAIR THE BROKEN COUING COMING OFF OF WALLS NEAR WALK-IN.

④⑤ DE-ICE THE WALK-IN FREEZER AS THE ICE BUILD-UP HAS BECOME DANGEROUS.

Received By: <u>Delfia Gonzalez</u>	REHS: <u>Andrew P. [Signature]</u>
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